

1000-0000-0000-0000 (for additional cross references)

DATE 7/10/74

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓	.....	Rejected
=	.....	Allowed
—	(Through numeral)...	Canceled
÷	.....	Restricted

N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Final	Original	Date
1	✓	2/02	
2			
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4			
5	✓	7/02	
6	✓	0	
7	✓	5/03	
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10	✓		
11	✓		
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Claim		Date					
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If more than 150 claims or 10 actions  
staple additional sheet here

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